UPHA New Membership Registration

UTAH PUBLIC HEALTH ASSOCIATION

☐ Individual $40.00 Benefits include the right to vote, hold office, and serve on committees, networking opportunities, legislative updates/alerts, a discount at the UPHA annual meeting, and participation in association activities to promote public health.

☐ Student $20.00 Benefits the same as individual; persons must be enrolled at least half-time in a college or university.

☐ Life $400.00 Includes benefits of individual membership for life.

☐ Retired $20.00 Includes benefits of individual membership; persons must be retired from full time employment.

☐ Are you a member of APHA? ☐ Yes ☐ No

☐ UPHA occasionally shares mailing lists with other associations. If you want your name removed from these lists, please check this box.

Name

Current Home Information (required):

Address

City State Zip

Phone

E-Mail

Current Work Information:

Position / Title

Organization

Address

City State Zip

Phone

E-Mail

Preferred Mailing Location: ☐ Home ☐ Work

Preferred E-Mailing Location: ☐ Home ☐ Work

Method of Payment

☐ Check ☐ Visa ☐ MasterCard ☐ American Express

Credit Card # Exp. date

Signature

Dues must accompany this application.
Make Check payable to: Utah Public Health Association.
Mail to: 715 North 1890 West, #39B, Provo, UT 84601